

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	IC NO.	DATE
FEE DETERMINATION			
O.P.E. CLASSIFIER			
FORMALITY REVIEW			

INDEX OF CLAIMS

+ - - - - - Rejected
 (Through numeral) - - - - - Allowed
 - - - - - Canceled
 - - - - - Restricted

N - - - - - Non-elected
 I - - - - - Interference
 A - - - - - Appeal
 O - - - - - Objected

Claim	Date	Claim	Date	Claim	Date
1		1		101	
2		2		102	
3		3		103	
4		4		104	
5		5		105	
6		6		106	
7		7		107	
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9		9		109	
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11		11		111	
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13		13		113	
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28		28		128	
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36		36		136	
37		37		137	
38		38		138	
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42		42		142	
43		43		143	
44		44		144	
45		45		145	
46		46		146	
47		47		147	
48		48		148	
49		49		149	
50		50		150	

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(1 FEET INSIDE)